



Pierce County Democratic Party

APPLICATION FOR DEMOCRATIC PRECINCT COMMITTEEPERSON

To: Pierce County Democratic Central Committee
PO Box 112168
Tacoma WA 98411-2168

Date: _____

I hereby make application to be appointed as Democratic Precinct Committeeperson in:

Legislative District _____ and Precinct _____

I am a registered voter, reside in the above precinct and I agree that my name become a matter of public record as being a Democrat. I understand I will represent the Democrats of said precinct as a member of the Pierce County Democratic Central Committee.

Applicant Signature

The Pierce County Democratic Party and the Legislative Districts request applicants to submit annual membership dues.

Name (please print): _____

Address: _____ City & Zip: _____

Phone--Home: _____ Work: _____ FAX: _____

E-Mail: _____

PDC Info. (see below:) Occupation: _____

Employer: _____ City: _____

The above application is submitted and recommended by:

District Chair

Date

Approved and Appointed by:

County Chair

Date

PDC Note: If you expect to contribute over \$100.00 to the Pierce County Democrats in a calendar year, please provide occupation and employment information so we can fulfill our Public Disclosure reporting requirements.